



NOTICE OF COMPLETION OF PUBLIC WORKS

Additional Filing Fee May Be Required

- This form must be typed or printed in ink.
- Fill in all blanks or form will be returned for correction (see back).
- **Please allow a minimum of 30 working days for processing.**

****ENTER YOUR FAX # or E-Mail Address:****

AND LIST YOUR MAILING ADDRESS BELOW

Contractor, company or agency name, address, city, state & ZIP + 4

Project Name:		
Contract awarding agency:		
Address:		
City:	State:	Zip:
Awarding agency contact person:		Phone #
Location:	Agency Contract #:	
DOLWD Project #:	Project Completion Date: **(MM/DD/YY)**	
Final Contract Amount: \$		

IF YOU HAVE ALREADY PAID \$5,000 IN FEES FOR THIS PROJECT, OR IF YOU PREVIOUSLY PAID ALL FEES DUE AND DID NOT HAVE ANY INCREASES IN CONTRACT AMOUNTS ENTER "NONE" AND, SKIP TO CERTIFICATION. OTHERWISE,

DESCRIBE ADDITIONAL WORK.

Description of additional contract/subcontract work performed	Name of contractor who performed this work	Amount of subcontract
CERTIFICATION: I hereby certify that the above information is correct. Enclosed is the additional filing fee computed at 1% of the total amount of all new contracts on this project, including the contract price of new work performed by the primary contractor not previously reported on the Notice of Work, up to a maximum of \$5,000. I also certify that all contractors who worked on this project complied with prevailing wage requirements as described in AS 36.05.010- .110 and AS 36.10.007- .990.	Total value of subcontracts	\$
	Additional value of work performed by primary contractor +	\$
	Amount subject to fee	\$
	Multiply by .01	
	Supplemental fee enclosed = ROUND FEES TO NEAREST DOLLAR	\$
For Dept. Use Only		
Amount: _____ Check Number: _____ Cash _____ Received By: _____ Date: _____ Credit Card Confirmation _____ Visa _____ MC _____ Project Name _____ DOLWD Project # _____		
For Dept. Use Only T-36 Clearance Approved By _____ Department of Labor and Workforce Development Date: _____		

How to expedite the processing of your Notice of Completion form:

ERRORS THAT CAUSE REJECTION

FEES - No fee included or incorrect amount. If total contract amount is less than \$25,000 a filing fee is not required. Contract amounts paid to owner/operators (sole proprietor/partnership) with no employees on the project are exempt from the fee. **The maximum total filing fee for any one project is \$5,000.00.**

PRIME CONTRACTOR - Additional value of work performed by primary contractor.

SUBCONTRACTORS - The name of each **NEW** subcontractor and the amount of the contract OR the name of existing subcontractors and the amount of any **NEW** work not previously reported on the Notice of Work.

SIGNATURE - Notice of Completion of Public Works must be signed by an authorized representative.

FILING INSTRUCTIONS

Additional fees are required for any increase in contract value, unless the maximum fee (\$5,000) has been paid. If the contract amount decreased, you may request a refund on this form.

If there is not enough space to list all required information on one form, use additional sheets. Please indicate at the top of each sheet "Page 1 of 2", "Page 2 of 2", etc. No other attachments will be accepted.

For questions call the nearest WH office:

Juneau:
(907) 465-4842

Anchorage:
(907) 269-4900

Fairbanks:
(907) 451-2886

For more forms, refer to: www.labor.state.ak.us/lss/lssforms.htm

Submit the notice and the appropriate filing fee payable to:

Alaska Department of Labor and Workforce Development
Wage and Hour Administration
3301 Eagle Street, Ste. 301
Anchorage, AK 99503-4149

If a fee is not required or if the fee is paid with a credit card, you may fax the notice to (907) 269-4915. For security purposes, fax the credit card number and expiration date on a separate sheet. You may either fax "OR" mail the original form. Please do not do both.